



State Medical Assistance and Services Advisory Council

225 E. 16th Street
Denver, Colorado 80203

January 23, 2013

6:00pm – 7:45pm

MINUTES

ATTENDING:

Council Present: Dennis Lewis, Theresa McCoy, Blaine Olsen, Peter McNally, Nancy Stokes, Mark Thrun, Victoria Vowel

Council Absent: Robert Bremer, Andrew Davis, Scott Ellis, Louise Vail

HCPF Representatives: Judy Zerzan, Patricia Connally

CDPHE Representative: Steve Holloway

HCPF Presenters: Katie Brookler, MaryKathryn Hurd, Sheeba Ibidunni

Guests: Nora Healy, Rebecca Lefebvre

Meeting called to order at 6:05 p.m.

November minutes were approved

Benefits Collaborative (BC)

Sheeba Ibidunni provided an update of the BC's ongoing processes. BC has had its first stakeholder meeting following the implementation of the pediatric assessment tool. The utilization review vendor said there is a strong correlation or alignment between the tool and the level of need.

Future BC meetings will be recorded.

The BC will review the Colorado Medicaid client appeals process and stakeholders are encouraged to participate in the collaborative process. There will be two focus groups (1) providers and (2) clients, families and advocates. Each group will have the opportunity to participate by phone, webinar or in-person.

Council is encouraged to share this information with their colleagues and when colleagues provide comments HCPF will acknowledge their efforts.

Legislative Update

MaryKathryn Hurd presented an update of HCPF's legislative agenda.

SB13-44 Contract with Rocky Mountain Health Plan-incentive payments tied to federal match. Bill will remove six month deadline from statute. The contract has been amended and there has been no stakeholder uproar. The prognosis should be good.

HB13-1068 On-site Inspections Of Medicaid Providers. This bill would change state statute to align with federal law that is designed to protect clients and guard against fraud, waste, and abuse. Stakeholders have concerns-bill was pulled to work out stakeholder concerns.

HB13-1199 Correction to Nursing Facilities statute. This bill specifies what continuing care retirement communities are exempt from paying nursing home provider fees and HCPF's authority to collect fee. The language of the bill has been vetted and there are no real concerns and no concerns. Data is currently reported monthly and is a huge administrative burden and this would change the reporting to annually

A bill on MMIS funding to allow extended spending authority may be introduced.

SB13-008 Elimination of the Waiting Period for Children's Basic Health Plan. Currently a child is eligible for children's basic health plan benefits if they have not been on a comparable plan with an employer paying at least 50% of the cost for at least three months. The bill eliminates the three month waiting period.

Issues to be discussed this legislative session:

Multiple bills on abortion have been introduced.

Colorado Health Benefits Exchange Act: bill introduced to repeal the Act

Peri-natal Hospice

Anti-Medicaid expansion

Medicaid expansion. Expansion bill will probably pass, it has a lot of support. Projected savings of \$280 million over 10 years.

Bulk purchase of vaccine. HCPF may add language to benefit them (purchase at lower fed rate) estimated savings to all. Providers currently taking hit-this will make things more affordable. Local health agency won't be able to deliver vaccines as people move into the exchange (federal purchase vaccines). Vaccines too expensive to keep on hand unless contract agreement with Health Department (probably won't have stock available). Some will keep immunization in house.

Adult dental moving forward. Legislature pushing back – this is looked at as an expense of Medicaid.

Requesting 1.5% provider rate-providers are wanting to ask for more than 1.5%.

Substance use benefit-there is general support-with questions as to appropriate placement.

Adult Quality Grant Overview

The Centers for Medicare and Medicaid Services (CMS) in June/July 2012 provided a two year grant opportunity to assist states to collect, report, and analyze data on the core set of health care quality measures for adults enrolled in Medicaid. Grant funding for the second year will depend on the success of the first year.

There are 26 Adult Core Measures and they are reported on to CMS on an annual basis. Colorado selected two Medicaid quality improvement projects to work on over the next two years: diabetes and depression.

By 2014 HCPF will report on 24 of the 26 measures. HCPF's partners in this endeavor are: Regional Care Coordination Organizations (RCCOs), one Health Maintenance Organization and all Behavioral Health Organizations. Letters of support have been received from Colorado Regional Health Information Organization (CORHIO), Center for Improving Value in Health Care (CIVHC), Colorado Health Institute (CHI) and others.

We are training our staff in LEAN and six sigma so as to help providers and contractors improve performance and quality of care. Hoping to use technology to assist in surveys as opposed to burdening providers. Grant money was awarded in December 2012 and we are in the process of hustling to demonstrate measures, improvement and engage clients.

Patient and Family Centered Care

Judy Zerzan presented the following: currently trying to get providers to self attest. Town hall meetings were scheduled in several locations: Denver, Pueblo, Western Slope and other areas. Looking for additional ways to reach out to stakeholders, advocates and providers. So far about 2,000 have self-attested and there should be about 16,000. Have tried several ways of getting the word out but have not had much success. Providers would receive a \$25 per visit increase. Currently trying to change messaging to get more attention directed toward this opportunity. Payments will be made quarterly.

The meeting adjourned at 7:45 pm.